

194864
194865

(Caption of Case)

Example: Application for a Class C Charter Certificate from
John Doe dba Doe's Limo

REQUEST TO CANCEL CLASS C TAXI
CERTIFICATE OF

SOUTHERN FLYER TAXI, INC.

COPY

Posted: lod

Dept: SA

Date: 9/9/08

Time: 9:50

BEFORE THE
PUBLIC SERVICE COMMISSION
OF SOUTH CAROLINA

TRANSPORTATION COVER SHEET

RECEIVED

DOCKET 2008-338-AUG 27 2008

NUMBER: 1995 - 1174 ORS
HW, W/W

If this is your first time filing an application with the PSC, you will not have a Docket Number. The Commission will assign one to you. If you have filed with the Commission before, a Docket Number was assigned and should be entered above.

(Please type or print)

Submitted by: Robert P. Kiser

Telephone: 843 448-4242

Address: 3243 Waccamaw Blvd

Fax: _____

Myrtle Beach SC

Other: _____

29579

Email: _____

NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely.

NATURE OF ACTION (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> Application - Class C Taxi | <input type="checkbox"/> Request to Amend Scope of Authority |
| <input type="checkbox"/> Application - Class C Charter | <input type="checkbox"/> Request to Amend Tariff (rate increase, etc.) |
| <input type="checkbox"/> Application - Class C Charter Bus | <input type="checkbox"/> Request to Amend Passenger Limit |
| <input type="checkbox"/> Application - Class C Non-Emergency | <input type="checkbox"/> Request |
| <input type="checkbox"/> Application - Class E Household Goods | <input type="checkbox"/> Exhibit |
| <input type="checkbox"/> Application - Class E Hazardous Waste | <input type="checkbox"/> Late-Filed Exhibit |
| <input type="checkbox"/> Application | <input type="checkbox"/> Letter |
| <input type="checkbox"/> Request for Extension to Comply with Order | <input type="checkbox"/> Proposed Order |
| <input type="checkbox"/> Request for Order Granting Authority to Obtain Certificate of Public Convenience and Necessity to Be Rescinded | <input type="checkbox"/> Publisher's Affidavit |
| <input checked="" type="checkbox"/> Request for Cancellation of Certificate | <input type="checkbox"/> Reservation Letter |
| <input type="checkbox"/> Request for Suspension | <input type="checkbox"/> Response |
| <input type="checkbox"/> Request for Reinstatement | <input type="checkbox"/> Return to Petition |
| <input type="checkbox"/> Request for Name Change on Certificate | <input type="checkbox"/> Other: _____ |

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PSC SC
DOCKETING DEPT.

Request for Cancellation of Certificate

File the original with:

Public Service Commission of South Carolina
Docketing Department
Motor Carrier Matters
P.O. Box 11649
Columbia, S.C. 29211
(803) 896-5100
FAX (803) 896-5199

Mail or fax a copy to:

S.C. Office of Regulatory Staff
Transportation Department
P.O. Box 11263
Columbia, S.C. 29211
(803) 737-0578
FAX (803) 737-0815

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ORS
T.T.W.W.W

DATE: 8-19-08

Please consider this a request to cancel my Class:

- ☒ C (Taxi) Certificate ☐ Class A Restricted Certificate
☐ C Charter Certificate
☐ C Charter Bus Certificate
☐ C Non-Emergency Certificate
☐ E Household Goods Certificate
☐ E Hazardous Wastes Certificate

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PSC SC
DOCKETING DEPT.

My Certificate of Public Convenience and Necessity Number is 6336-A

Southern Foreign Taxi DBA
(Name of Company) Sut

(If applicable)

3243 W. Main St
(Street Address)

(Mailing Address if different from Street Address)

MB, SC 29579
(City, State, Zip Code)

(City, State, Zip Code)

(843) 448-4242
(Telephone Number)

[Signature]
(Signature)

[Signature]
(Title)